

**TOLEDO, OHIO 43604**

**EMAIL ADDRESS:** \_\_\_\_\_

**APPOINTMENT APPLYING FOR:** \_\_\_\_\_

Are you related to any current employee of Lucas County:		No	Yes
If yes, give name and position			

**Are you related to any other member of the committee, commission, board or agency for which you are applying?**      **No**      **Yes**

**Are you related to any employee of the committee, commission, board or agency for which you are applying?**                      **No**                      **Yes**

Do you serve on any other public or not-for-profit boards?	No	Yes
If yes, please identify _____		

**Are you a defendant or plaintiff in any pending civil law suits that could impact your service on this public board?**                      **No**                      **Yes**

**If yes, please identify** \_\_\_\_\_

**Have you ever been convicted of a violation of any law, other than minor traffic offenses?**  
**If so, please provide details:**

If you are responsible for child support obligations, is your obligation current?		
Yes	No	Does Not Apply

**EDUCATION:**

High School \_\_\_\_\_ Date of Graduation \_\_\_\_\_  
Post-High School Education \_\_\_\_\_

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**MILITARY HISTORY:**

Branch of Service \_\_\_\_\_

Discharge Date \_\_\_\_\_ Type of Discharge \_\_\_\_\_

Highest Rank \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Present or last employer \_\_\_\_\_

Your title/duties \_\_\_\_\_

Dates of Employment \_\_\_\_\_ to \_\_\_\_\_

Previous employment (list employers, position, dates of employment)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCE:**

(List three persons not related to you who you have definite personal knowledge of your qualifications for this position)

Name	Address	Telephone
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_____	_____	_____
_____	_____	_____

**STATEMENT:**

Please provide a brief statement as to why you feel you are qualified for this appointment. If you are seeking re-appointment, please indicate what your contributions have been to the committee/commission during the time of your service. For re-appointment, please state your meeting attendance history.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please include any other information here that you feel would be of importance to the Commissioners in the selection process.

\_\_\_\_\_  
\_\_\_\_\_

Are you aware of any circumstances that exist or could exist that would create a conflict of interest or the appearance of a conflict of interest if you are appointed to this board?                      No                      Yes

If yes, please explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

I certify that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief and are made in good faith. I understand that any false statements will void

**this application and any actions based on it.**

**SIGNATURE OF APPLICANT**\_\_\_\_\_ **DATE**\_\_\_\_\_

**Please submit a detailed resume with this form and return to the Lucas County Administrator at One Government Center, Suite #800, Toledo, Ohio 43604-2259.**